Annual Report

SOURIS VALLEY REGIONAL CARE CENTRE

1990-1991

SOURIS VALLEY REGIONAL CARE CENTRE

SOURIS VALLEY REGIONAL CARE CENTRE

Box 2001
Weyburn, Sask.
S4H 2L7

June 1991

Honourable Mr. George McLeod,
Minister of Health,
3475 Albert Street
T.C. Douglas Building
REGINA, Saskatchewan
S4S 6X6

Dear Mr. McLeod:

It is my pleasure to present to you, the Annual Report of the Souris Valley Regional Care Centre.

This report covers the period April 1, 1990 to March 31, 1991.

Respectfully submitted,

Mildred Lang

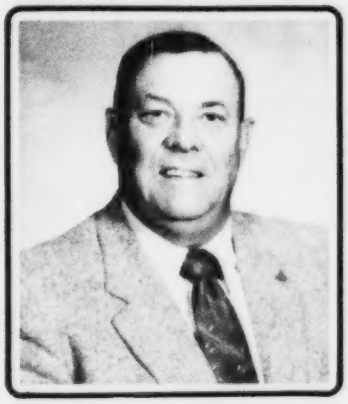
Mrs. Mildred Lang,
Chairman of the Board,
Souris Valley Regional Care Centre.

92-02425/

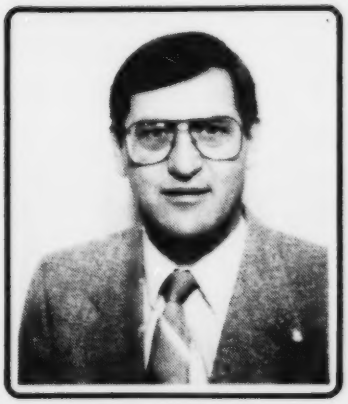
Members of the Governing Board 1990-91

Mrs. M. Lang
Chairman
Stoughton

Mrs. F. Madsen
Vice-Chairman
Wauchope

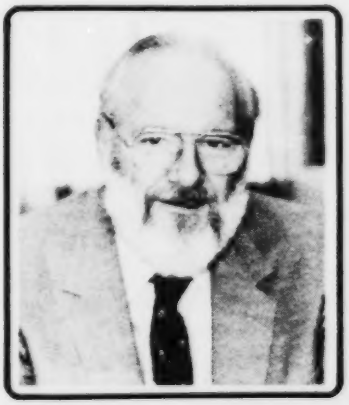


Mr. O. Storlie
Lampman



Mr. T. Schuck
Weyburn

Mr. A. Brigden
Kisbey

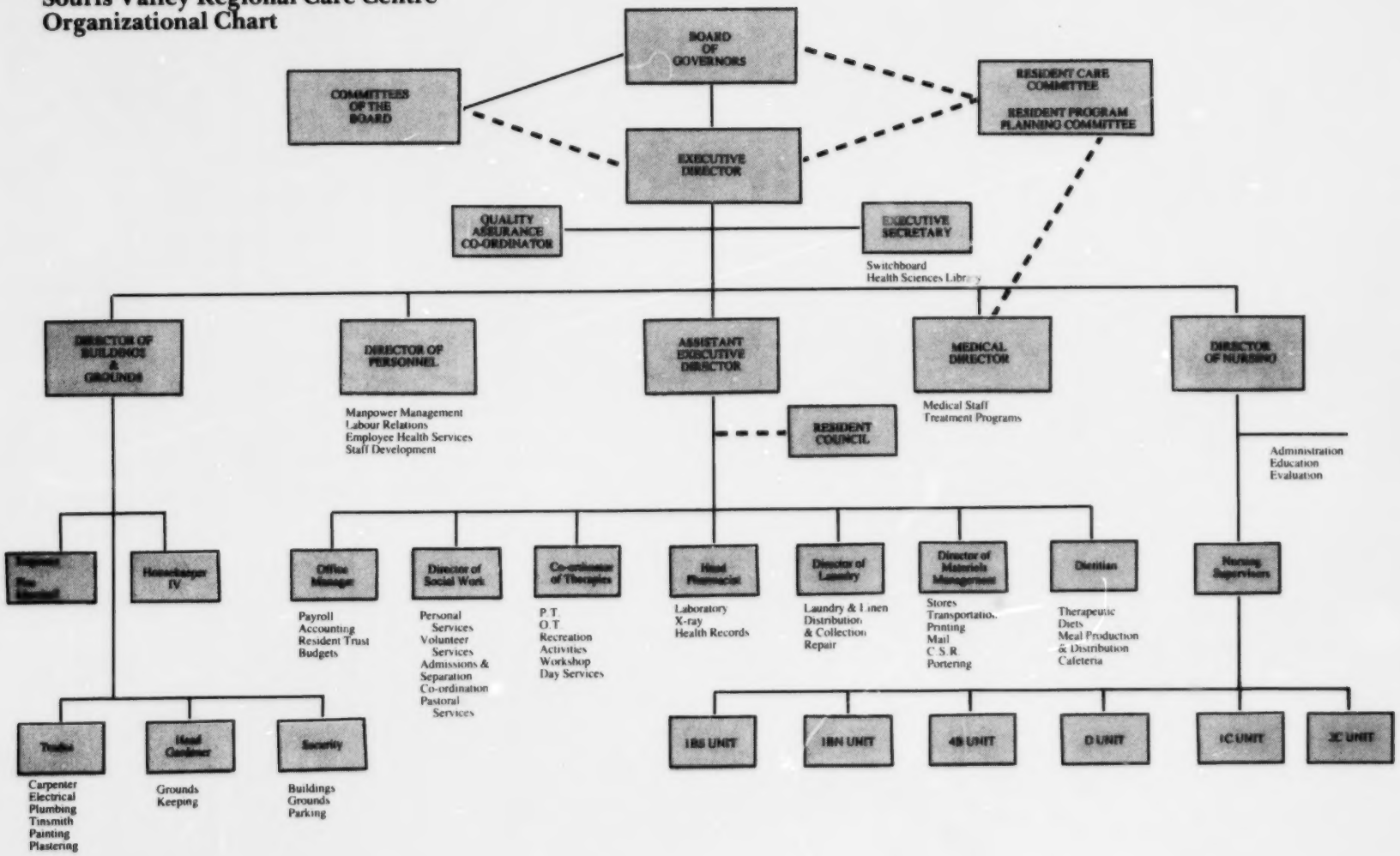


Mr. P. Boyle
Executive Director

EXECUTIVE COMMITTEE:

Mrs. M. Lang
Mr. O. Storlie
Mr. T. Schuck
Mr. P. Boyle

Souris Valley Regional Care Centre
Organizational Chart



P.G. Boyle — Executive Director

The year 1990-91 saw the completion of the Power Plant conversion project which will ensure a continuous supply of steam, heat, hot water and electricity for the Centre's operations.

Survey by the Canadian Council on Health Facilities Accreditation in September resulted in achievement of Accreditation Status.

To encourage the personal growth of employees and develop a pool of professional nurses to serve the Centre, the Board of Governors has established a Bursary Assistance Program for employees who want to obtain professional nursing qualifications.

Souris Valley Regional Care Centre
Mission Statement 1990-91

Preamble:

Under Section 35.2 of the Housing and Special Care Homes Act, Souris Valley Regional Care Centre, Weyburn, is designated as a 300 bed, Level IV care facility to serve the south-eastern part of the province, an area of 26,000 square kilometers, with 55,000 residents living in small, rural communities and an agriculture based economy.

The Minister of Health has appointed a Board of Governors, composed of community minded citizens, which is entrusted with the legal and moral responsibility of directing the Centre. The Executive Director, who is accountable to the Board, is responsible for the day to day operation.

Philosophy:

The Centre is motivated by the belief that each individual, whatever his or her frailties, has a capacity for continued growth, for an enrichment of living experiences and for personal satisfaction.

To this end, the Centre strives to provide a support system to allow the individual to live as independently as possible, to accept the rights of the individual to express him or herself, to assist each individual to maintain a sense of dignity and freedom and to make a continuing contribution to one's surroundings.

The Centre's primary objective is to provide in-patient care and treatment for chronically ill adults who do not require acute hospital care and treatment but do require regular and continuous medical attention, highly skilled nursing care and special techniques for the improvement or maintenance of function. Medical and support services are provided under criteria established and funded by the Department of Health, Continuing Care Division or as determined otherwise by the Board.

Services Provided:

The Board has designated one hundred twenty-six (126) beds for Level IVA care "for persons with advanced mental deterioration, who require supervisory care," including 1B North, a twenty-six bed unit which has been designated for cognitively impaired residents; one hundred sixty-four (164) beds for Level IVB care "for persons with advanced chronic illness or disabilities who require supportive care on a 24-hour basis"; and ten (10) beds for Level IVC care "for persons whose general condition is such that they could not withstand an intensive and vigorous rehabilitation program but who can benefit from a slower-paced restorative regime designed to improve functional ability."

Medical care will be provided by two staff physicians who are responsible for diagnosis and treatment. Consultative services for psychiatry, podiatry, speech, hearing and dentistry are obtained by referral. With support from the general practitioners of the community, medical staff service shall be organized to ensure 24-hour coverage for emergencies.

The Centre is active in physical rehabilitation, assessment and treatment of geriatric and psychogeriatric disorders and family counselling. Residents with severe acute illnesses will be referred to the local Weyburn Union Hospital, the base hospitals in Regina or the Weyburn Mental Health Centre. Residents who improve will be discharged home or referred to a facility providing the appropriate lower level of care. Terminally ill residents will be cared for at the Centre unless the family or the physician request a transfer to another facility.

There is an agreement to accept applications from the eastern part of the Wascana Rehabilitation Centre catchment area. Applicants referred from outside the catchment area may be accepted on the basis of need to be reunited with their families, provided accommodation is available without unreasonably denying access to designated populations and with approval of the Board.

Residents and their relatives are encouraged to contact Administration to express their concerns. There is a Resident Council to speak on behalf of residents. Residents and relatives are also encouraged to attend and participate in clinical conferences where individual plans of care are formulated and evaluated on the basis of identified need.

Respite Care service up to thirty (30) days per year is available to care-giving families referred by the District Co-ordinating Committee.

A limited amount of out-patient service in the form of Adult Day Services is available on a scheduled basis, five (5) days a week, to clients referred by the District Co-ordinating Committee.

Institutional Relationships:

In the belief that the health care needs of the community can be most effectively met by proper assessment and placement of clients and the co-ordinated allocation of resources, the Centre participates in and supports the goals of the Weyburn and District Co-ordinating Committee.

Through the Admissions and Separations Committee, the Centre will provide Level IV care assessment service to other facilities in the Region upon request.

Services obtained on a contract basis are radiology and some laboratory service from the Weyburn Union Hospital.

Services provided on a contract basis are laundry to the Weyburn Union Hospital, and dietary, laundry, housekeeping and maintenance to the Weyburn Mental Health Centre.

Ambulance services are obtained through the local Ambulance Board, which has arranged for a private operator to provide service to the public.

Services Not Provided:

Specifically excluded from admission to our services are: children; persons with acute illnesses, medical or psychiatric; persons with tendencies to violent or destructive behaviour such as to put residents and staff at risk and any other person for whom service is determined to be more advantageously provided by an established agency with a mandate to provide such service.

Community Resources:

The Centre has developed an active Volunteer Program which is made up of community people. Volunteers are involved in social, recreational and personal activities for residents.

Weyburn Ministerial Association arranges regular religious services for the residents and is available for individual counselling.

As a responsible corporate body, the Centre is committed to purchasing goods and services from the local community whenever possible and where costs are competitive.

Education:

Orientation and Inservice Education programs are provided within the facility to ensure the competence and proficiency of the staff. Professional and vocational associations, which promote the development and improvement of health-care are supported by the Centre.

The Centre endeavors to provide Health Education to the community and conducts several teaching programs for residents and families.

The Centre is an approved experience area for both Diploma and Psychiatric nursing students from the Saskatchewan Institute of Applied Science and Technology, Wascana Campus.

In conjunction with the Saskatchewan Institute of Applied Science and Technology, Kelsey Campus, the Special Care Aide Program is carried out in the Centre.

Workshops and seminars on long term care topics are organized and presented by Centre staff for special care home personnel from the region.

Research:

The Centre will conduct research into resident management and program development in a manner which ensures the safety and security of residents.

There is a commitment to keeping up to date with trends within the Health-Care system introducing the use of new knowledge as it is appropriate and financially feasible.

Quality Assurance/Risk Management:

The Board believes in evaluating the quality of care, the services delivering care and the environment within which these activities occur to ensure that a high standard of care is provided with minimum risk of harm to residents, staff and visitors. To this end a facility-wide Quality Assurance/Risk Management program has been established.

Long Term Planning:

Long Term Planning is a component of the facility-wide Quality Assurance Program with goals and objectives being developed and reviewed on a regular basis.

Through its membership in the Weyburn Area Health Services Planning Council, the Centre is participating in an extensive study of the health care and service needs of the community with the goal of designing a comprehensive, co-ordinated and efficient health care system to serve the present, and future needs of the area.

All services provided by the Centre will be performed in accordance with standards established internally, legislated or those of the Canadian Council on Health Facilities Accreditation.

The quality and volume of service is subject to availability of resources. The Board, after receiving appropriate advice, may set limitations it deems necessary.

Adopted September 17, 1985
Reviewed & Revised February 1990

AUDITOR'S REPORT

To the Members of the Legislative Assembly
of Saskatchewan

I have audited the balance sheet of Souris Valley Regional Care Centre as at March 31, 1991, and the statements of operations, equity, and changes in financial position for the year then ended. These financial statements are the responsibility of the Centre's management. My responsibility is to express an opinion on these financial statements based on my audit.

I conducted my audit in accordance with generally accepted auditing standards. Those standards require that I plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by the Board's administration, as well as evaluating the overall financial statement presentation.

In my opinion, these financial statements present fairly, in all material respects, the financial position of the Centre as at March 31, 1991 and the results of its operations and the changes in its financial position for the year then ended in accordance with the basis of accounting as disclosed in Note 2 to the financial statements.

Regina, Saskatchewan
November 15, 1991

W.K. Strelioff, C.A.
Provincial Auditor

Souris Valley Regional Care Centre
Balance Sheet
As At March 31

	1991	1990
Assets		
Current:		
Cash	$2,010,258	$1,070,632
Accounts receivable (Note 3)	202,037	154,198
Due from the Department of Health (Note 4 and Note 5)	170,695	523,750
Prepaid expenses	80,700	75,960
Inventories	551,529	583,713
Total	3,015,219	3,408,253
Fixed assets (Note 6)	313,246	342,299
Total assets	$3,328,465	$2,750,552
Liabilities and Equity		
Current:		
Accounts payable	$ 331,836	$ 136,932
Accrued salaries	274,585	247,625
Accrued vacation	700,620	676,276
Deferred revenue	17,167	26,188
Deferred capital grant	67,565	958
Loan (Note 10)	27,588	---
Total	1,419,361	1,087,979
Long term loan (Note 10)	---	27,588
Working capital advance (Note 11)	150,000	150,000
Equity (Statement 3)	1,759,104	1,484,985
Total liabilities and equity	$3,328,465	$2,750,552
Trust		
Assets:		
Cash in bank	$ 32,618	$ 32,335
Liabilities:		
Residents' Trust	32,618	32,335

(See accompanying notes)

Souris Valley Regional Care Centre
Statement of Operations
Year Ended March 31

	1991	1990
Operating Revenue:		
Operating grant — Department of Health	$11,273,788	$10,731,704
Resident fees	2,338,455	2,263,382
Rentals and recoveries:		
Weyburn Mental Health Centre	279,461	288,287
Saskatchewan Property Management Corporation	185,831	151,987
Staff dining room	113,815	112,264
Workers' Compensation Board	140,273	61,292
Laundry revenue	121,229	115,349
Other	26,943	13,345
Total revenue from operations	14,477,795	13,737,610
Operating Expenses:		
Resident care	6,157,329	5,764,408
Dietary	1,504,931	1,464,511
Laundry	553,420	475,997
Administration	2,166,016	2,045,362
Linen	125,109	114,549
Housekeeping	851,003	816,609
Resident activity & recreation	358,266	344,392
Plant operation	1,113,227	1,051,627
Plant maintenance	743,351	711,106
General medical	195,365	187,233
Other diagnostic & therapeutic	609,778	603,086
Total operating expenses	14,377,795	13,578,880
Operating surplus (Note 7)	100,000	158,730
Other revenue:		
Investment income	205,359	162,367
Canteen	15,752	5,780
Parking revenue	3,017	1,839
Donations	302	4,007
Proceeds on fixed asset disposal	---	675
	224,430	174,668
Other expenditures:		
Purchase of fixed assets	3,806	52,037
Non-capital expenses	17,452	4,307
	21,258	56,344
Surplus from other operations	203,172	118,324
Surplus for the year — Statement 3	$ 303,172	$ 277,054

(See accompanying notes)

Souris Valley Regional Care Centre
Statement of Equity
Year Ended March 31

	1991		1990	
Equity in fixed assets:				
Balance, beginning of year		$ 342,299		$ 349,472
Fixed asset additions:				
— capital grants	$ 53,393		$ 58,175	
— operations	3,806	57,199	52,037	110,212
Fixed asset disposals		(2,902)		(3,910)
Depreciation		(83,350)		(113,475)
Balance, end of year		313,246		342,299
Accumulated surplus (unappropriated):				
Balance, beginning of year		1,118,116		842,901
Excess revenue over expenditure (Statement 2)	303,172		277,054	
Less: appropriation for repayment of loan (Note 10)	(3,017)	300,155	(1,839)	275,215
Balance, end of year		1,418,271		1,118,116
Accumulated surplus (appropriated):				
Balance, beginning of year	24,570		22,731	
Appropriation for repayment of loan	3,017		1,839	
Balance, end of year		27,587		24,570
Total equity (Statement 1)		$1,759,104		$1,484,985

(See accompanying notes)

Souris Valley Regional Care Centre
Statement of Changes in Financial Position
Year Ended March 31

	1991	1990
Operating Activities:		
Surplus for the year	$ 303,172	$ 277,054
Net change in non-cash working capital (Note 13)	636,454	48,063
Cash provided by (used in) operations	939,626	325,117
Investing Activities:		
Capital equipment grant	53,393	58,175
Purchases of equipment from capital grants	(53,393)	(58,175)
Cash provided by investing activities	---	---
Total cash provided (used)	939,626	325,117
Cash balance, beginning of year	1,070,632	745,515
Cash balance, end of year	$2,010,258	$1,070,632

(See accompanying notes)

Souris Valley Regional Care Centre
Notes to Financial Statements
March 31, 1991

1. Establishment of Centre

Order-in-Council #909/81 issued pursuant to The Housing and Special-Care Homes Act designated Souris Valley Regional Care Centre as a special care home effective July 1, 1981. The former designation of Souris Valley Extended Care Hospital was cancelled concurrently by Order-in-Council #946/81 issued pursuant to The Public Health Act.

2. Significant Accounting Policies

a) Revenue

Provincial operating grant revenue is recorded on an accrual basis in accordance with the funding policy applicable to each fiscal year as determined by the Department of Health. Estimated surplus (deficit) funding is recorded as repayable (receivable) with provincial grant revenue adjusted by a corresponding amount in the current year. Adjustments to estimated surpluses or deficits, as determined in the annual settlement review by the Department, are accounted for in the year that they are determined as adjustments to provincial grant revenue, with corresponding amounts reflected as repayable (receivable) to (from) the Department of Health.

b) Equipment and Furnishings

Equipment transferred from the Department of Health is recorded at appraised value as at January 1, 1975. Equipment, leasehold improvements and furnishings purchased since January 1, 1975 are recorded at cost. On disposals capital assets are removed from the accounts at their carrying value and proceeds on disposal are recorded as ancillary revenue.

The acquisition of equipment and furnishings is financed either by Provincial capital grants or from surplus funds of the Centre. Grants received are reflected as increases in "equity in fixed assets" to the extent that they are used to purchase assets. The excess, if any, is recorded as a deferred capital grant. Purchases of equipment and furnishings financed from surplus funds are recorded as expenditures in the "Statement of Operations" and also are reflected as increases in "equity in fixed assets" in the "Statement of Equity."

In accordance with normal fund accounting policies, a provision for depreciation does not appear in the statement of operations but is charged to unappropriated equity to reflect the decrease in value of the fixed assets. The fixed assets are depreciated on a straight line basis over the estimated useful life of the assets. The rate ranges from 10% to 20% per annum.

c) Inventories

Inventories are valued at average cost in central stores and maintenance, and at cost in other areas.

d) Accrued Vacation Pay

The Centre follows the policy of recording accrued vacation pay liability for all staff with a corresponding amount recorded as receivable from the Province of Saskatchewan in the year in which the vacation leave is earned by employees rather than in the year it is paid.

3. Accounts Receivable

Under the Board approved policy, employees receive interest free loans repayable over two years for computer purchase program. Included in accounts receivable is $79,729 related to the Centre's employee computer purchase programs.

4. Due from the Province of Saskatchewan, Department of Health

	1991	1990
Accounts receivable — accrued vacation pay	$700,620	$676,276
Surplus funding repayable	(529,925)	(152,526)
	$170,695	$523,750

5. Accounts Receivable — Accrued Vacation Pay

The Department of Health is currently reviewing the appropriateness and consistency of the accounting policy being followed by regional care centres with respect to the recognition of accrued vacation pay as a receivable from the Department. If any change to the accounting policy is required, the Department will notify the Centres accordingly, and the necessary change will be accounted for in the year of change.

6. Fixed Assets

	1991			1990
	Capital Cost	Accumulated Depreciation	Net Book Value	Net Book Value
Equipment	$1,718,062	$1,412,644	$305,418	$336,328
Leasehold improvements	202,450	202,450	---	---
Building service equipment	67,785	67,785	---	---
Bazaar account — furniture and fixtures	37,424	29,596	7,828	5,971
	$2,025,721	$1,712,475	$313,246	$342,299

7. Provincial Grant

Provincial operating grants are made to the Centre by the Department of Health in accordance with approved annual operating budgets. The Minister of Health approved a surplus retention policy effective on April 1, 1984 which applies to the 1984/85 and subsequent fiscal years. Under this policy, a special care home will be entitled to retain its operating surplus up to a level of 1% of its approved operating budget for the applicable year subject to the following:

(a) a home shall retain surpluses up to $10,000 regardless of the size of its operating budget; and

(b) the maximum amount of surplus to be retained by a home for any one year of operations shall be $100,000.

Operating deficits will be the direct financial responsibility of the home, according to a departmental publication. Prior to 1984/85, grants were made to ensure special care homes operated on a break-even basis and accordingly operating surpluses were repayable to and operating deficits were funded by the Department.

8. Ancillary Revenue and Expenditures

According to arrangements made with the Department of Health, the Centre is allowed to retain investment income earned during the year, private donations and proceeds on sale of fixed assets. This income is excluded in determining the adjustments to the operating grant revenue.

These ancillary funds retained by the Centre are to be applied to asset acquisitions and specific projects of a non-operating nature, as specifically authorized by the Centre.

9. Lease Arrangement

Effective April 1, 1987, the Saskatchewan Property Management Corporation entered into a lease arrangement with the Department of Health for the Souris Valley Regional Care facility. Under this arrangement the Centre will not be required to make rental payments for the use of this facility.

10. Long Term Loan

This interest free loan was made by Saskatchewan Hospital Services Plan in 1976 to cover the cost of plug-ins for the parking lot, which must be repaid in 1991. Accordingly the Centre is appropriating yearly for the purpose of restricting the expenditure of surplus funds until the loan comes due.

11. Working Capital Advance

This advance was made by Saskatchewan Hospital Services Plan to the Souris Valley Regional Care Centre. The advance is interest-free and repayable at the discretion of the Continuing Care Division, Department of Health.

12. Related Parties

Included in these financial statements are expenses resulting from routine operating transactions conducted at prevailing market prices with various Saskatchewan crown-controlled departments, agencies and corporations with which the Centre is related.

Account balances resulting from these transactions are included in the Balance Sheet and are settled on normal trade terms. Other amounts due to (from) related parties and the terms of settlement are described separately in the financial statements and the notes thereto.

13. Changes in Components of Non-Cash Working Capital

	1991	1990
Decrease in accrued grants receivable	$353,055	$148,446
(Increase) decrease in accounts receivable	(47,839)	383
Decrease (increase) in inventory	32,184	(35,898)
Increase in prepaid expenses	(4,740)	(9,127)
Increase (decrease) in accounts payable	194,904	(174,722)
Increase in accrued salaries	26,960	24,983
Increase in vacation pay	24,344	92,582
(Decrease) increase in deferred revenue	(9,021)	458
Increase in deferred capital grant	66,607	958
Net changes in non-cash working capital	636,454	$48,063

14. Comparatives

Certain prior year comparative figures have been reclassified to conform with the current year presentation.

Health Care Statistics

		1990-91	1989-90	1988-89
Admissions:				
New Admissions		48	62	54
Readmissions		12	12	7
Total Admissions		60	74	61
Separations:				
Discharges		16	19	19
Deaths		49	42	41
Total Separations		65	61	60
Residents on Register April 1st		294	292	295
Total Admissions		60	74	61
		354	366	356
Total Separations		65	61	60
		289	305	296
Residents Discharged to Active Treatment Hospitals		39	62	53
		250	243	243
Residents Readmitted from Active Treatment Hospitals		35	51	49
Residents on Register March 31st		285	294	292
Levels of Care at March 31st:	4A	143	149	145
	4B	129	128	128
	4C	13	16	20
	Total	285	294	292
Waiting List at March 31st		7	7	10
Total Resident Days		105,950	106,411	107,008
Average Daily Census		290.23	291.55	293.14
Average Length of Stay		1,003	897	823
Total Days of Stay		65,269	54,727	54,498
Occupancy Rate		97%	97%	98%

Nursing Department:

Total Quality Management has been the theme behind most of the Nursing Department's activities this year.

The key elements of quality assurance, risk management, utilization review and employee involvement have been incorporated in a Quality Management Plan.

A statement of purpose and primary function, goals and objectives have been developed. Our committee structure was revised and staff representation on the committees was increased. Program objectives were expanded to meet the needs of an aging population with chronic affective disorders and for residents requiring palliative care.

A time assessment study was conducted that provided substantial evidence for the need to increase the direct hours of care now required by the residents of SOURIS VALLEY REGIONAL CARE CENTRE. We continue, however, to provide services within the same confines of previous budget years.

Risk Management has been the department's primary focus during the year. Review and outcome mechanisms were developed for incontinency, decubitus ulcers, restraints and medication errors. A preventative approach to management has resulted in the identification of risk indicators, preventative maintenance and equipment check lists and new standards for Infection Control.

In keeping with the philosophy of total quality management which emphasizes team building and interdepartmental networking, Nursing has actively participated in the multidisciplinary team processes and care planning. Collaboration with the Personnel Department over recruitment strategies has resulted in a significant reduction of full time professional nurse vacancies which threatened our ability to provide services at this time last year.

There has been a concentrated effort to increase staff education and training within the facility. Fifteen Aides have enrolled in the Special Aide Program and a new program on Professional Assault Response Training for the mentally impaired elderly has been implemented on a regular basis to assist nursing staff in dealing with aggressive behaviour.

Medical Department:

The last year was a successful year. Our Centre was surveyed by three representatives from the Canadian Council on Accreditation of Long Term Care Facilities and we had another successful survey.

Several consultants including a Physiatrist, Cardiologist, Urologist, Podiatrist, Dentist, Radiologist, Psychiatrist, and Eye, Ear, Nose and Throat Specialist are available on a weekly or monthly basis for consultation. All other Family Physicians in Weyburn assist our two Staff Physicians with on-call and relief duties.

We are preparing to present a paper on "General Anesthesia as a Risk Factor in Senile Dementia" on October 24th, 1991 at the Canadian Association in Gerontology Annual Meeting in Toronto.

The two Staff Physicians at the Centre regularly attend the monthly Continuing Medical Education programs at the Weyburn Union Hospital as well as their monthly staff meetings by invitation. Our Staff Physicians also participate in the Inservice Education programs at our Centre and at the Weyburn Mental Health Centre.

Social Work Department:

During the fiscal year, approximately 86 applications for admission were processed. Included in this number are 10 applications for respite care and 1 application for rural level IV beds.

PERSONAL SERVICES:

The Personal Services Workers purchased 4,948 articles for residents at a cost of $41,623.29. The Workers also took 142 residents downtown on personal outing shopping trips.

Services provided by the following were:
Hairdresser — 1,605 appointments
Barber — 1,214 hair cuts

VOLUNTEER SERVICES:

Volunteers donated 18,818 hours to our Centre, 233 individual volunteers gave 6,137 hours and 48 groups gave 12,681 hours. There were 98 individual volunteers and 9 groups recruited throughout the year. This year a Junior Volunteer Program has been established to assist the Recreation Department.

CHAPLAINCY SERVICES AND PASTORAL CARE COMMITTEE:

There has been ongoing cooperation and support from the Weyburn Ministerial Association and the Centre's Pastoral Care Committee to enhance the spiritual life of the residents. We now have a Lay Pastoral Visiting Program in place to complement our existing pastoral services.

Quality Assurance Co-ordinator:

The Quality Assurance Co-ordinator and the Quality Assurance Committee continue to facilitate implementation of the Quality Assurance/Risk Management program as authorized by the Board of Governors.

Activities of the past year included:

1) Development of a Quality Assurance/Risk Management Plan and Quality Assurance Committee Standards which were distributed to all Centre Departments as Quality Assurance/Risk Management Guidelines.

2) Provision of twenty (20) educational sessions to Administrative Heads, Department Heads, Staff and Multidisciplinary Committees to address Quality Assurance/Risk Management concepts and methodologies.

3) Introduction of the new 1991 Canadian Council for Health Facilities Accreditation Standards.

Laundry Department:

The Laundry Department processed 1,713,152 pounds in the past year which included other contracted systems.

Souris Valley Regional Care Centre laundry and linen supply is a participating member of the Saskatchewan Health-Care Association Group Purchasing Program, which ensures that we purchase products of a high quality standard at the best competitive cost.

The wash-sorting area of the Laundry has been upgraded with window replacements and wall restorations.

Housekeeping Department:

With the reduction of 1 E.F.T., Housekeeping continued to provide services required. By streamlining our work procedures without loosing the quality, we were able to maintain a sanitary environment for the welfare of residents, visitors and other employees.

We continued to provide contract services for Weyburn Mental Health Centre and Southeast Regional College.

Seminars and educational courses were attended throughout the year by housekeeping staff.

Materiels Management Department:

The year 1990-91 saw the Materiels Management Department, consisting of Purchasing, Stores, Transportation, Central Supply and Portering, provide the various needs of the Centre. Our staff complement consisted of 8.5 employees.

Approximately 1,800 purchase orders were processed through the Department. Cost of the various goods and services purchased totalled over $2,100,000. A sizable portion of this was spent locally. The Centre continues to "Buy Local" whenever it is feasible to do so. However, the major portion of our goods were purchased under the Saskatchewan Health-Care Association Group. Our membership in this Group continues to show economic benefits for the Centre, while providing top quality products for use.

The Department maintained its function of evaluating new products and equipment to keep the Centre abreast of the latest products available. Whenever a product has shown a proven benefit in the care of our residents, changes were implemented.

Therapy Department:

Total attendance, individual visits and time spent with residents increased substantially in 1990-91 over 1989-90 in the Occupational, Physical and Activity Therapy Units. More residents attended Recreational events during this period. Sixteen residents produced $1,673 of saleable items in the Industrial Workshop while earning $6,040. The Workshop's saleable goods inventory, however, was increased substantially because of the lack of an available market. This has been rectified and total sales should soon catch up to total salary. The Resident Canteen purchased fewer goods and had fewer sales in 1990-91 although total profit on goods sold increased $2,754 over 1989-90. Day Services statistics remained roughly the same with 2,538 client hours expended in 1990-91 as compared to 2,655 in 1989-90.

Buildings and Grounds Department:

The Buildings and Grounds Department consists of Maintenance, Power Plant, Housekeeping and Security. The Maintenance Department includes electrical, plumbing, painting, carpentry, tinsmithing, plastering and grounds keeping.

During the year, the Maintenance Department completed 21 capital projects. Significant among those projects were:

1. Installation of a bath system on 1C Unit.

2. Nurse call system on 4B Unit.

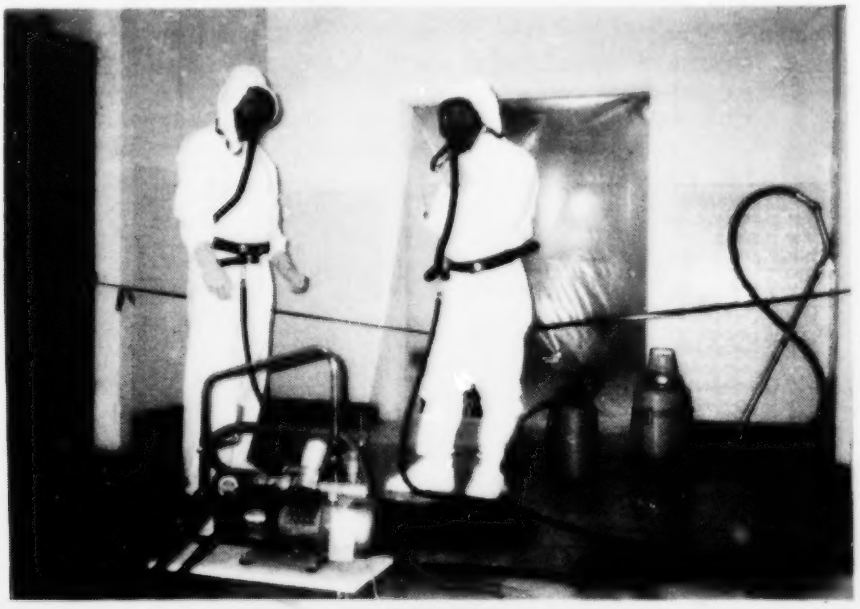
3. Electrical upgrading on 1BN Unit.

4. Retiling of the dietary trayline floor.

5. Renovations to the laundry soiled area.

In addition to routine and preventive maintenance schedules, the Maintenance Department completed a total of 3937 repair requisitions.

Risk Management Programs have been developed and implemented in each trades area. These programs provide the Centre's residents, staff and visitors with a safer and more comfortable environment.



Safety First

Repairing asbestos insulation.

Personnel Department:

This past year resulted in a complete turnabout in respect to recruiting professional nurses with the Centre now having a full complement. Recruiting in other areas has not been a problem.

Our Department was instrumental in the development and implementation of a bursary program available to all full-time staff entering the R.N./R.P.N. education programs.

The Inservice Education Department provided inservice programs attended by 899 staff plus an additional 102 taking part in workshops/seminars outside the Centre.

Permanent positions are categorized as follows:

DEPARTMENT	POSITIONS
Nursing	176.85
Buildings & Grounds	18
Therapies	22.5
Social Work	7
Power House	10
Laundry	19.4
Dietary	34.5
Housekeeping	32.5
C.S.R., Pharmacy, Laboratory	8.25
Administration, Personnel, Finance, Medical, Materiels Management	23.4

Power Plant Department:

Late December and early January saw the completion of the new two million dollar plant. Gone are two older boilers and the old generating equipment and in are four new boilers and a diesel driven electrical generator.

This renovation saw a staff reduction of five personnel. The Power Plant, through the transition period, was able to continue to deliver its obligations of heat, light and water to the Centre and its on site agencies.

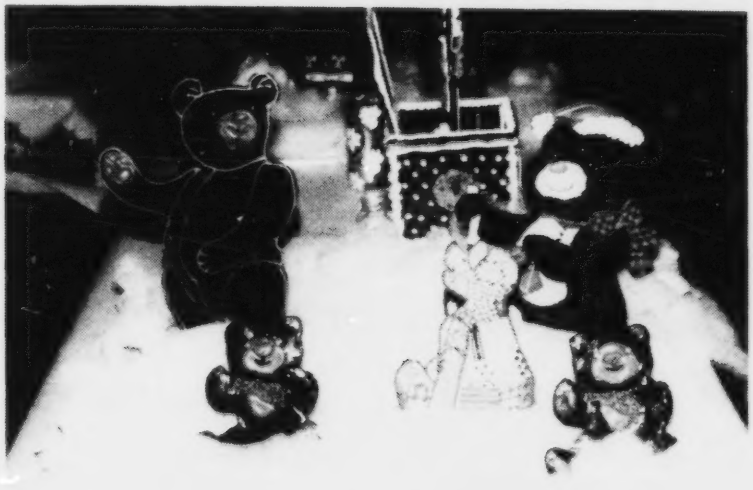
The Power Plant staff monitor all the Centre's fire protection equipment. Fire drills are directed monthly by the Chief Engineer and results are very good. Fire lectures are given to all staff annually and fire system maintenance is performed when required.

Dietary Department:

During this past year, the Dietary Department provided a total of 333,261 meals to residents of the Centre and Weyburn Mental Health Centre as well as Day Services clients.

To meet our objective of ensuring food and fluids are provided in the appropriate texture modifications to meet individual resident's needs, we experimented with preparation methods resulting in greater variety, both in types of food offered and in number of texture choices available.

We continued to participate in special functions and festivities by providing appropriate food and decorations.



1991 Continuous Service Awards

TEN YEARS

Back: Roberta Tollefson, Sheila Castle, Warren Wallin, Charlene Honig.
Front: Carol Ellingson, Ruby Coakwell, Maura Collard.
Missing: Lee deVries, Cameron Gammack, Lana Lansdell, Brian Maas, Guy Mabee, James Mantei, Margaret Rebrinsky, Darlene Reich, Richard Wanner.

FIFTEEN YEARS

Back: Phyllis Lindskog, Kenneth Hill, Debra Frank, Glenn Mabee, Grace Gammack, Peter Boyle, Dr. Mahdi Juma.
Front: Clara Ness, Sadie Kelln, Annie Borschowa, Dorothy Frederick.
Missing: Irene deVries, Diane Herberholz.

Vivian Kew

Judith McLeod

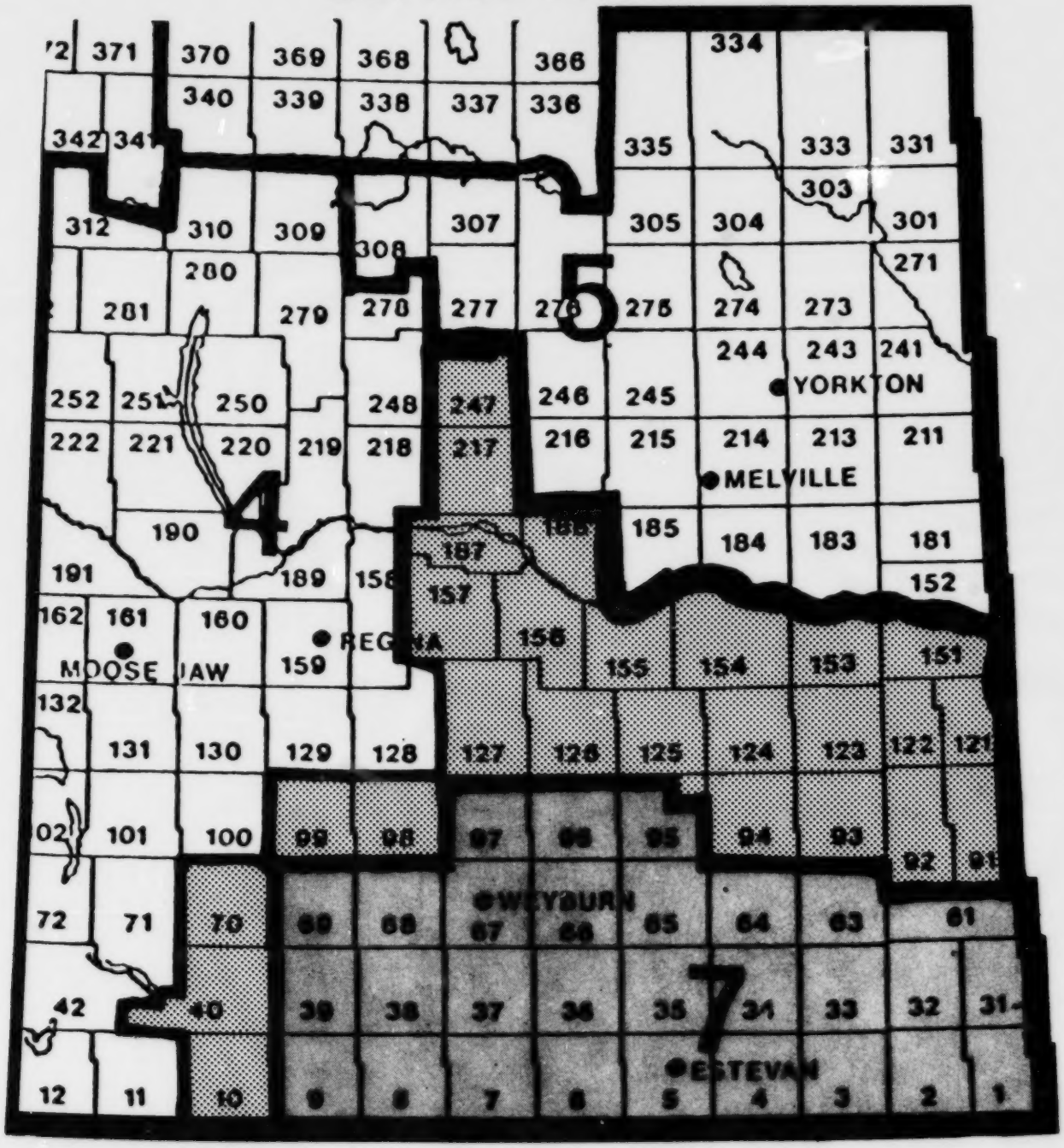
TWENTY-FIVE YEARS

Loretta Meagher

THIRTY-FIVE YEARS

Edward Baird

Extended Care Hospital Service Areas



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